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APPLN. TYPE SMALL E nonprovisional YE EXAMINER GUCKER, STEPHEN 1. Change of correspondence address or inc CFR 1.363). Change of correspondence address (Address form PTO/SB/122) attached. Tee Address" indication (or "Fee A PTO/SB/47; Rev 03-02 or more recent) Number is required. 3. ASSIGNEE NAME AND RESIDENCE	Suite 5400 Seattle, WA 9 DATE 2002 OLYPEPTIDES, FUNCTION	Group PLLC e, Stille 8104 FIRST NAMED INVI Daniel R. Twar HAL FRAGMENTS A	I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USF	rtificate of Mailing or Transis Fec(s) Transmittal is bein with sulficient postage for fir il Stop ISSUE FEE address PIO (703) 746-4000, on the control of t	smission g deposited with the Unite st class mail in an envelop above, or being facsimil date indicated below. (Depositor's name (Signature (Date CONFIRMATION NO. 6785
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Typed or printed name Stepher	n J∜ Rosenman,	Ph.D.	Registratio	43,058	
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